

# Instant Convert

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Dr. Penzias made the doctor issue of *Boston* magazine. “Look, he’s cute as a bug’s ear,” Lorene said. I looked again, more for a point of self-comparison.

## LORENE'S DEFINITION of "CUTE"



Ex-husband



Dr. Penzias

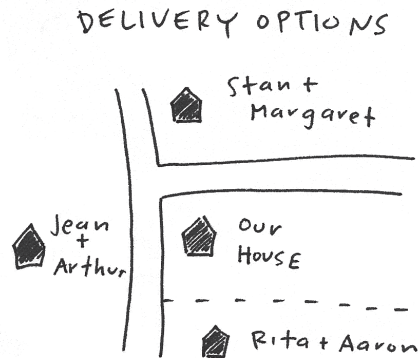


Me?

We congratulated him at our March appointment. My pregnancy test was negative, although I hadn’t gotten my period yet. We re-re-reviewed what he liked to call our options, which were indistinguishable from our plan, since there was really only one—the follicle-stimulating hormone (FSH) injections. I was supposed to drink lots of water and call in on the first day of my new cycle. The injections would start on Day 3. We could stop downstairs for a patient-information session on our way out, or we could come back at our convenience. We went for the latter, just in case I never got my period. Besides, *ER* had given us a pretty good introduction.

Day 1, I called the nurse to schedule the info session and I spoke with the pharmacy. We needed a Saturday-with-nobody-at-home

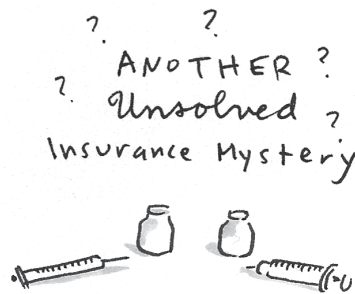
delivery. The nobody-home part wasn't a problem, but the below-freezing temperatures complicated things. I had to hang up to think about which of my neighbors I wanted to bring into the loop, then I remembered, we had Lorene's shop.



Lorene printed out the website's injection instructions and read them out loud as we drove in for our information session. We sat down at a long table, just the two of us. We *were* the information session.

The injection itself turned out to be the least of our worries. First, the hormone powder had to be mixed with sterile water. Then everything had to be sterilely transferred from one tiny glass ampule to another, using needles and syringes.

Lorene practiced the injection in a rubber cork. "That's all there is to it," the nurse said, smiling a Friday-four-p.m. smile and disposing of the syringe in the biohazardous waste box. "Do you want to try again?"



INSEMINATIONS have to be MEDICALLY-SUPERVISED  
but INJECTIONS don't?

I looked at Lorene. The nurse added, “It’s all written down. There’s a video on the website, and you can call the on-call doctor at any point in the process . . .”

Lorene said, “I’ll try it again.” I felt myself relax.

“Have you ordered your FSH?” the nurse asked me while Lorene was mixing the fake stuff.

### ORIENTATION CHECKLIST

- ☒ Blah Blah blah blah
- ☒ blah blah blah
- ☒ blah blah b/ah
- ☒ blah blah blah
- ☒ Patient verbalizes  
understanding of risks

I launched into our delivery dilemma as I was signing her orientation attendance. “The pharmacy’s right in this building, you know, you could just pick it up.”

The pharmacist handed us our shopping bag: the FSH, sterile water, syringes, needle/biohazardous-waste “sharps” box, a purse-size cold-pack carrier (free gift from the makers of Gonal-f FSH), and I threw in my Cow Tale that I’d purchased from their small candy selection.



Sunday night, we headed upstairs around 9:30. We planned to retire with the paper after our first injection. Lorene laid out the written instructions, the ampules of FSH and distilled water, and the syringe on the windowsill. She calmly mixed the FSH and drew it up with the syringe. I lay on the rug. She knelt down and leaned toward me. Misplacing the intimacy of the moment, I thought she was going to kiss me. Instead, she lifted my shirt and rubbed my belly with an alcohol wipe. “Yow! Cold!” I complained.

“Baby!” she laughed and reached for the syringe. “Okay.” She uncapped the needle, pinched my belly skin, and announced, “On the count of three, you’re going to feel a sharp prick. One, two . . . okay.

Okay, just a second.” She looked at the tip of the needle over the tops of her glasses. “All right. Ready? Okay, one, two . . .” She looked at me. “Do *you* want to do this?”

*Me?* I couldn’t get my finger to stay put when we had to do the finger-prick blood test in high school biology. “All you.”

“I hate needles. Hold on a minute.” She took a deep breath. “Okay, this is not going to give you cancer.” She started over with the skin pinch. “Here we go. One, two, three.” Done.

“Thank you.”

“You’re nice to say that,” she said.

“No, I’m really grateful. I’m so glad I’m *not* doing this alone.”

She lay down on top of me, then pushed herself up suddenly. “Oh, God, does it hurt?”

“Not a bit.” She went downstairs and poured herself a whiskey.



### CANCER COURT 2020

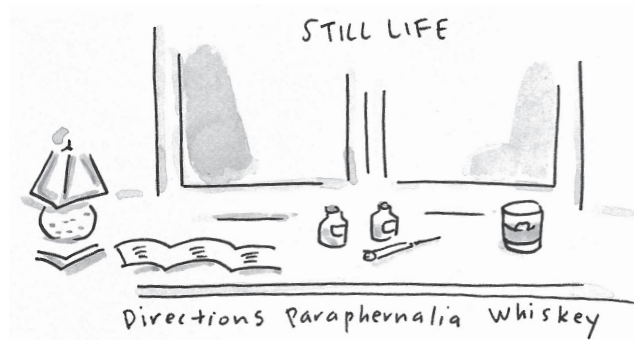
**JUDGE:** Your wife was concerned. How about you? Did **YOU** ever think about what she was injecting?

**ME:** Like what was in it? Mouse pee or hamster hormones or something? At that point, it seemed like our only option. And I trusted Dr. Penzias . . . a doctor wouldn’t let you harm yourself. (*Courtroom laughter*)

**JUDGE:** Order! (*Laughter dies down*)

**JUDGE:** Was **NOT** getting pregnant an option?

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We kept up our 9:30 nightly; we got the one-two-threes down to two. On Friday morning, we incorporated the blood work and ultrasound monitoring into our early-morning routine. The two of us would flop into the car, no shower, no breakfast; the inconvenience never even had a chance to register in our uncaffeinated state.

I was just starting to wake up when I was in the ultrasound room. The technician provided live commentary on my follicles. "One on the left ovary, lots of good-sized ones coming along. None on the right, a handful of up-and-comers."

"What's a good-sized-one?"

"We like to see them larger than twelve millimeters."

HEAR THAT?!  
TWELVE  
MILLIMETERS,  
HUP - TO!



We received our updated injection instructions by phone that afternoon: Stay the course. More monitoring on Sunday.

I had a hard time differentiating the effects of the hormones from other inputs, like the added stress I experience working on a new job. My first cartoon for *Seed* magazine was due in a week. I'd submitted three sketches and hadn't heard anything, so I Gonal-e-mailed the editor. She called the next day to say she liked all three, and she'd decided on one, with one small

my BRAIN



my BRAIN  
on GONAL-F



change: “Can you make the scientist look less like a stereotypical scientist? We’re trying to make science sexy here.”



Let me tell you what we’re trying to do around here—graphic shorthand!

“You want a hubba scientist?”

“Yes,” she laughed. I drank a big glass of water, gave him a new head, and faxed it off.

HORMONAL ME

I actually felt the effects of hydration—going from zero (not counting coffee or lettuce) to sixty-four ounces—more profoundly than the hormones.

After a lifetime of proud public-bathroom avoidance, I was reduced to making pit stops on my way into Boston.

Q: How do you get so much done?

A: I don’t go to the bathroom.



TIME spent thinking  
about when/where to go  
+ TIME spent going  
+ TIME spent getting  
back to work  
= TIME not spent working

On Sunday (Day 10), left ovary was ahead. We went to Meredith and Jonathan’s for dinner carrying a cake tin full of injection paraphernalia. The extra bottles we needed to mix a new batch of



Gonal-f wouldn’t fit in the free purse-size carrier. Lorene also believed we should be bringing dinner for, not accepting dinner from, the six-months-pregnant people. I promised I would make them dinner if we were ever lucky enough to be in that boat.

After we did the dishes, Meredith got on her computer in the living room and Jonathan went up to clean out the litter box, leaving us the privacy of the kitchen. Lorene opened the cake tin. “Shit!” We’d brought all of the equipment and none of the instructions. “Never mind, I think I remember,” she said. She filled the syringe full of sterile water and inserted it into the Gonal-f bottle. “Nothing’s coming out . . . Nothing’s coming out. There’s too much pressure, NOTHING’S COMING OUT!”



“Try pulling the plunger back.” She did and the sterile water squirted all over.

“Shit! Look, it *was* going in! I should’ve never listened to you.”

I shot back, “Don’t blame me, I thought you were asking for help.”

Lorene lowered her voice and said, “I don’t want to have this conversation in front of other people,” just as Meredith walked in. I laughed at the timing. “Don’t laugh at me!” Lorene said. She slammed her keys on the floor and left the house.

Meredith helped me put everything back into the cake tin. Lorene and I drove home in silence. A few miles from home, I managed an “I’m sorry.”

“I’m sorry, too.” She was sobbing, sorrier than I was, as if it was all her fault.

We found another bottle of sterile water in the kit at home. Lorene took her time (we were already late) and mixed up the new batch. The shot hurt; we had run out of new spots.

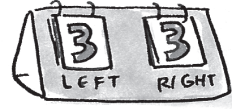
“Thank you,” I said, and went to my studio to work. Lorene went to sleep.

When we are angry, our tendency is to punish the other person, but when we do, there is only an escalation of the suffering. Instead send a gift. Offer what is needed.

—THICH NHAT HANH

The next morning, we dragged ourselves out of bed for another ultrasound. There was no real reason for Lorene to come with me, but there was never any question, even after a bad night, that she would. We were in this together.

Right ovary had tied up the score. Updated instructions: One more dose of Gonal-f, then Pregnyl, the ovulation-stimulating hormone, the next night.



We were in the chute: IUI Thursday. A pressure in my lower abdomen, something like having to go to the bathroom, had been building.

Lorene went back to bed when we got home. She was still in bed at dinnertime.

I made her come down to eat and she went back up as soon as we finished. The next morning she woke up, got out of bed, showered, and got dressed as if she hadn't stayed in bed all day the day before, and there was no further mention made of it.

Thursday's IUI, two vials, was routine. My ovaries had deflated and the red Pregnyl needle patch was gone by Friday. I harbored a hope that *this* was the cycle; Lorene must have, too, but the hope was too tired to mention.

LORENE



I've known  
her forever



I don't know  
her at all



She does this  
sometimes



She's gone  
off the  
deep end.





I woke up with my period on the first of April. I lay quietly in bed waiting for Lorene to wake up so I could tell her. “Is this an April Fools’ joke?” *Ba-dum-bum.*

We skipped April; we had the trip to California. Lorene and I spent two days in Hope Springs at a desert motel that had been converted to a laid-back spa. I watched her float on a blue raft in the hottest pool, my breasts (which still insisted I was pregnant) spilling out of the top of my bathing suit.

I was determined not to feel disappointed in Hope Springs. I felt at peace, the wind riffling through the palm trees. The landscape was so unfamiliar, it did not invite the ruminations on relocation that could undercut the peace of vacationing in a place closer to home. I had a pile of good books, CDs, my wife, and we were going to see our friends the next day . . . I wasn’t wanting for anything, no excepts.



Jane and David met us outside of Joshua Tree at a wonderfully funky inn. They’d driven down from Berkeley. After drinks and dinner, we went back to our own adobe casitas. I gave Lorene the lamp side of the bed and fell asleep on my back in minutes. A couple hours

later, I awoke in the same position, staring up at the ceiling, my head buzzing long enough for me to recall the feeling, and then I had a seizure. Just a small one. The first one I'd had since my surgery four years earlier.

There were the snuffly breaths after it was over, then the thick tongue. Lorene was sitting up on her elbows observing me. "Your right hand was waving, your elbow bent—the bed was shaking."

It was a few minutes before I could talk. "It's not supposed to happen." This is the one goddamn surgical benefit I was promised.

"It scares me. I don't want you trying to get pregnant again until we know."

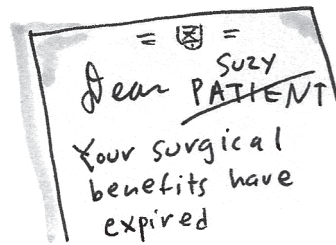
"Until we know what?"

"Why you had a seizure. I don't want you giving birth—" She was crying. "I don't want to lose you."

I held her. I had been told that thirty percent of the time, seizures are of "unspecified origin." Neurologists cannot determine what causes them after months or years of ruling out every god-awful neurological disease on the books. I didn't have time. "We'll call Dr. Finn when we get back." *Maybe something was different. Maybe it's why I can't get pregnant.* I flipped the TV on and watched, dozing off and on, until the sun came up.

Dr. Finn, my neurosurgeon, wasn't the least bit concerned about my seizure. As his nurse explained, "Seizures will be your Achilles' heel—the warning signal you need to slow down and rest." *On vacation? And what were they before the brain surgery? Never mind.*

The seizure seemed a long time ago, or California is a long ways away, anyway; Lorene and I resumed our lives, went back to



trying to get pregnant, planning Meredith's baby shower and another bike-a-thon.



The brain book made the cover of Workman Publishing's spring catalog. A promising development, it seemed, until I heard from the head of chain-store sales, "Suzy, I'll be honest with you, I don't get the book . . .

I don't get it either!

I was wondering if you would come down and have lunch with me."

I accepted his invitation. Less than five minutes later, *ping!* I (and a long list of *Who's Who* at Workman) received his e-mail:



**From:** Jim

**Subject:** Lunch and Presentation by Cover Girl Suzy Becker

**Date:** May 15, 2003

Suzy Becker will share her new book with us on May 22nd at 1:00 p.m.

Lunch will be served. Please RSVP!

Thanks, Jim

*Presentation?* Now I would have to cram making slides into the next day's schedule, which began with an 8:00 a.m. appointment at Boston IVF and concluded with an 8:30 p.m. Board of Selectmen's meeting, followed by my 9:30 shot.

It was after 9:30 when I raced up my studio stairs to get the updated instructions for our nightly shot.

MESSAGE #1:

“Your ovaries are responding very well to the hormones. With your permission, we’d like to convert the cycle from an IUI to an IVF. Otherwise, we’ll need to scrap this cycle. Please call back before five.”

MESSAGE #2:

“Please continue the Gonal-f at 187 to keep our options open. You are scheduled for more blood work at 7:45 tomorrow morning, and we will confer again tomorrow afternoon.”

“IVF?” Lorene squawked. I had repeated the message in my most matter-of-fact tone.

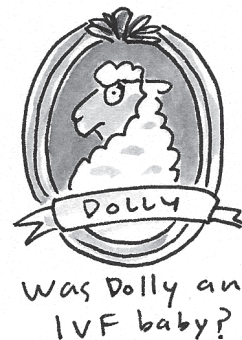
“It doesn’t matter. We’ll just do the 187 and find out all about it tomorrow.”

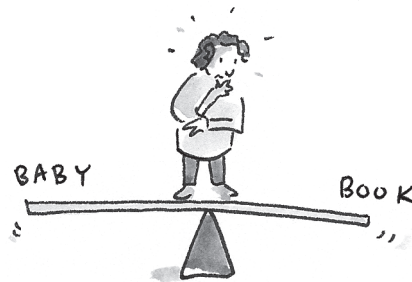
“You don’t want to do IVF,” she reminded me.

“You don’t want to scrap the cycle . . .” Lorene got in bed with her laptop, and I went back to my studio to make slides.

The next afternoon, I was home to receive the call. Instead of three or four follicles, I had busted out fourteen. Now I had to decide (they had less than an hour to get approval from my insurance) whether I wanted to do IVF or scrap the cycle.

Knowing nothing about IVF, I should’ve had a hundred questions. I came up with one: “Will I be able to resume IUIs next cycle?” *Like normal infertile people?* The answer was yes. If I gave my approval, my “egg retrieval” would be scheduled for Monday, the transfer for Thursday. *Cover Girl Presentation Day!*





I called Lorene. Neither one of us could have imagined choosing IVF until it was pitted against scrapping the cycle. There was no discussion. “Go for it!” Lorene said.

I called my editor. No answer. I called the patient coordinator back: “What about a Friday transfer?” *An extra day in the test tube, petri dish, or whatever.* Not possible.

The editor called back and I briefed her on my baby project. “Are you crazy? Yes!

Go for it! The book can wait!” *She is the World’s Best Editor.*

*She doesn’t give a fat rat’s ass about your book.*



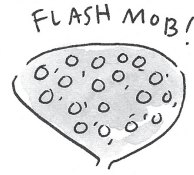
I dialed the patient coordinator with forty-eight minutes to go. “I’ll do it.”

“We’re on!” she was feeling the excitement. “Wait! We didn’t give you an anti-ovulatory—we’re on, as long as you don’t ovulate between now and then.”

“Can you give it to me now?”

“Can you get to the pharmacy before 5:30?” I was in the car at 4:32. Sitting in rush hour traffic a few miles from the pharmacy at 5:40. I ran in at 6:10, still hoping. There was a note: My prescription had been called in to the other branch, which was open until 7:00. At 7:15, I was back home, anti-ovulatory in hand.

Saturday's blood work confirmed I hadn't ovulated. And the technician was thrilled with my follicles—eighteen at least.



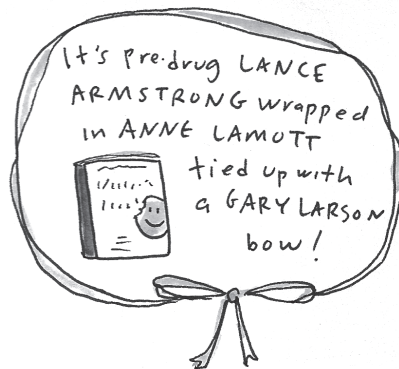
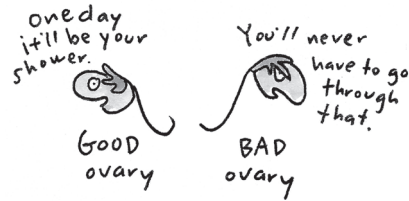
We spent the rest of the day getting ready for Meredith's surprise shower—cooking, wrapping presents, cleaning and decorating the house, preparing the pin-the-hair-on-the-bald-baby-Meredith's-head game.

Meredith arrived Sunday morning dressed for a day of driving, double-checking the Ride FAR route. She was one month away from her due date. She was telling me a story as we walked toward the living room, "We stopped at Starbucks on the way over. A complete stranger asked me if I was going to 'have a vaginal birth'!"

"Did you say nasal?" I opened the living room door.

"SURPRISE!"

We were all exhausted by the end of the shower. Lorene and I napped in the hammock, then I got up to complete Workman's publicity questionnaire, the consolation prize I planned to attach to my lunch cancellation notice. I hit "send" and immediately worried my efforts to provide sales hooks for the book were sinking it further.



I printed out the pre-op forms and admission information so I could take it all to bed. A nurse had called in the middle of Meredith's shower to confirm my retrieval and to remind me to arrive preregistered.



Lorene and I had finished reading the ten-page consent form and signed at eleven, one hour before my fluids cutoff. "I don't think I've ever been under general anesthesia before . . . maybe once, for my wisdom teeth."

"Are you worried?"

"Should I be? I guess the aftereffects are worse, right?" That had been a selling point for my "awake" brain surgery. "I'm used to being awake . . . It's weird, don't you think, that we don't know who the surgeon is until we walk in?"

"Mmm. Are you afraid?"

"No." I got myself one last glass of water and we worked on the crossword puzzle until we turned out the lights.



There wasn't much incentive to get out of bed the next morning. No coffee, no breakfast, nowhere to be until ten. "C'mon," Lorene prodded me, "it's trash day." I rolled out of bed, did the trash, showered, and went up to my office to collect a few things I could do while I was resting post-retrieval.

Dr. Rankin (the gynecologist's referral we'd dissed) was our surgeon. The nurse described him as more "laid-back" than Dr. Penzias. Dr. Penzias had never struck us as uptight, but we weren't nurses. Dr. Rankin was very kind, not the least bit disapproving, but Lorene never passed up an opportunity to make an extra-good impression. She complimented his accent, which he revealed was Scottish.

The anesthesiologist arrived and Lorene kissed me good-bye, gave my wedding ring-less hand a last squeeze, and went off to the waiting room. The next thing I remember, I was being transferred to the post-op area. Lorene came in about the same time as the saltines and ginger ale. We were free to go, or to stay as long as we liked. The lab would call us with the official egg count in the afternoon.

The count was twenty. (The average count is ten to twelve.) I called to brag to my IVF-vet friend. She was unimpressed. (She was also alone with her twins, without child care for the week.)

"The egg count is unreliable," she said. "What really matters is how many fertilize."

She was always one step ahead. Lorene's and my sanity-preservation plan required us to celebrate the step we were on. I stayed in bed, did a little work. I felt fine, felt like I was slacking, in fact, since I felt no pain, just my normal afternoon drowsiness. I closed my eyes for a second and woke up two hours later when the phone rang.

"Suzy, it's Margaret" (the neighbor from across the street), "Do you have any eggs?" *Do I have any eggs? Do I have any eggs? Well, Margaret, let me tell you. I have TWENTY! TWENTY EGGS!* "I just need one."

#### Egg Retrieval

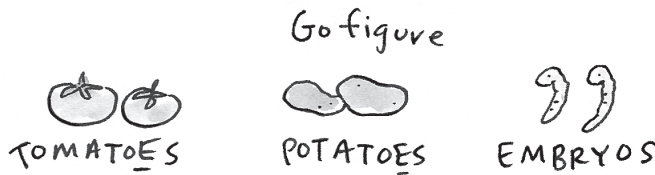
The doctor uses a vaginal ultrasound to guide a hollow needle to the ovaries. The needle punctures the follicle and the egg and fluid are suctioned out.



She was at the door a few minutes later. I handed her the lone egg, recognizing, after the fact, that my bedhead conveyed a certain not-exactly-working-from-home ethic.

Fourteen of my twenty eggs fertilized. I called my IVF friend. She was not impressed. "What really matters is how many good embryos you get."

We got two "beautiful eight-cell embryos" and one six-cell embryo which we agreed to freeze.



The transfer doctor's resemblance to Al Franken stuck with me, whereas his last name, something one-syllable, did not. He put the two beautiful embryos back into my uterus (while I was off in general-anesthesia land), and we were back on the road an hour later. Dr. Franken called around noon to report that my six-cell embryo never made it into the freezer; it had started to fragment. *So much for my two beauties.*

I couldn't refrain from asking, while trying to head off a nonanswer, "I know you may not know, and your answer won't change anything, I'll still have to wait to see whether I get pregnant, and of course, I won't hold you to it, I'm just asking, really for my, you know, my peace of mind, what's the likelihood of the transfers fragmenting?"

"As you said. We don't know."

The IVF coordinator called in the late afternoon. She was following up: Fourteen out of twenty was a high fertilization rate, very promising. Two embryos out of fourteen fertilized eggs was very low. The results

of the stain testing they'd done on the extra eggs and sperm might tell Dr. Penzias something about the egg/sperm quality, which could inform the next cycle.

I interrupted. "So this one's not going to work out?"

"I'm sorry, I didn't mean to suggest that. Not at all. You only need one good egg."



It's just that that one can be so damn hard to come by.